

A480

13th Euro Abstracts

patients did not fill in the scale, only 31% greatly improved, 57% improved, 10% did not changed and 2% worsened during medical intervention. TBS correlated moderately with clinical judgement of change; 0.749 , $P < 0.001$, and also, linearity was observed, with changes at end-of-trial visit in both domains of the OABq-SF; $F_{\text{lineal}} = 23.02$, $P < 0.001$ and $F_{\text{lineal}} = 31.02$, $P < 0.001$. TBS was able to differentiate groups of patients with different levels of change in symptoms severity and health-related quality of life of the OABq-SF questionnaire; $F = 8.09$, $P < 0.001$ and $F = 10.5$, $P < 0.001$, respectively, with effect sizes between 1.69 and -0.44. **CONCLUSIONS:** The Spanish version of TBS scale demonstrated strong validity and responsiveness psychometric properties to be used in the subjective assessment of outcomes related with treatment of OAB.

URINARY/KIDNEY DISORDERS – Health Care Use & Policy Studies

PUK35

PATIENTS WITH BPH: RESULTS AT 6 MONTHS FOLLOWING TREATMENT WITH PHYTOTHERAPY VERSUS OTHER TREATMENTS

Taieb C¹, Auges M¹, Perrin P²

¹PFSA, Boulogne, France; ²Lyon Sud, Pierre Benite, France

OBJECTIVES: Assess the impact of the treatment of urinary disorders of the lower urinary tract (LUT) suggestive of benign prostatic hypertrophy (BPH) using medical

treatment under actual conditions of use. **METHODS:** A pragmatic cohort of 420 patients (France, Italy, and Portugal) treated medically, was followed up for 6 months, using 3 questionnaires: IPSS, MSF4 and SF12. **RESULTS:** 366 patients under medical treatment were assessed. 267 patients were treated with phytotherapy, versus 80 patients on “other treatments”. At inclusion, the patients treated with *Serenoa repens* versus “other treatments” were different on the following characteristics: Age ($P = 0.0047$), time since diagnosis ($p = 0.006$), country ($P < 0.0001$), IPSS score ($P = 0.0087$), physical dimension of the SF12 ($P = 0.0071$). The “change from baseline” for the scores of the IPSS and SF12 self-assessment questionnaires between the 2 treatment groups was comparable. a generalized linear model adjusted for age, time since diagnosis, country, IPSS score, and the physical dimension of the SF12 score at inclusion was used, making the 2 treatment groups comparable. We observed an improvement in the IPSS score from 6 weeks. We were not able to demonstrate a significant difference between the 2 treatment groups concerning the “change from baseline” of the IPSS score ($P = 0.7288$). The same applies to the analyses at 3 and 6 months where the p-values were 0.2047 and 0.0947 respectively. We did not observe any statistical difference in the scores for the 2 dimensions of the SF12 between the 2 treatment groups. **CONCLUSIONS:** We observed an improvement in the IPSS and SF12 scores from 6 weeks. This improvement was not significantly different between the 2 treatment groups. Under actual conditions of use, the various medical treatments gave similar improvements.